Effective October 1, 2003 10-807-059													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER THAN		
TOTAL CLAIMS			8.				.	RATE	FEÉ	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			8 minus 20=		*	0		XS 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		•	0		X43=	+	-	X86=		
ML	JLTIPLE DEPEI	NDENT CLAIM P					l	A43=		OR	∧60 =	· · ·	
A M the difference is column d in less than a second section .								+145=		OR	+290=		
	* If the difference in column 1 is less than zero, enter "0" in column 2 (CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								- 1385	OR	TOTAL		
10	-24-06		ŞMALI	LENTITY	9#	OTHER SMALL							
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 6,	Minus	- 2	છ	<u>.</u> O		X\$ 9=	X	OR	X\$18=		
	Independent	• (Minus	 (<u> </u>	= 0	lt	X43=/		OR	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM		!	+145=		ÓR	+290=		
								TOTA			TOTAL		
		A	DØIT. FE	E		ADDIT. FEE!							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI: TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	200		•	l	X43≃	1	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
						A	TOTAL DOIT, FEE		OR	TOTAL ADDIT. FEE			
	(Column 1) (Column 2) (Column 3)										•	•	
AMENDMENT C		CLAIMS REMAINING . AFTER AMENDMENT.	•	HIGHE NUMB PREVIOU PAID F	ER . USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		8	ΙΓ	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		3		X43=	1		X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1	OR			
• #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OPTION TOTAL ADDIT. FEE												<u> </u>	
_ : i	The "Highest Num	ber Previously Paid	For (Total or	Independel	nt) is the	highest numbe	r foun	d in the a	ppropriate bo	in coh	.mn 1.	•	

Application or Docket Number